## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Concerned American Voters	C C00525899
Check if 24-hour report 48-hour report New report Amends report filed	on 01 / 27 / 2016
Full Name of Payee	Date of Public Distribution/Dissemination
i360	08 06 2015
Mailing Address PO Box 37046	Amount
City State Zip Code	0.00
Baltimore MD 21297	Transaction ID : SE.5658  Date of Disbursement or Obligation
Purpose of Expenditure Voter Data and Outreach Capability  Category/ Type  O04	08
Name of Federal Candidate Support Office	e Sought: House District:
PAND DALII	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For:
Full Name of Payee	Date of Public Distribution/Dissemination
i360	08 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 37046	Amount
City State Zip Code	0.00
Baltimore MD 21297	Transaction ID : SE.5659  Date of Disbursement or Obligation
Purpose of Expenditure August Monthly Outbound Phone Fees  Category/ Type  004	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
RAND PAUL Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	01 31 2016
Signature	

## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F24A Transaction ID:

Report amended to reflect reduction in planned expenditures. August activity was significantly lower than anticipated, and budget was combined with next month's payment.

Form/Schedule: Transaction ID:

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Concerned American Voters	C C00525899
	M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report filed	on 01 27 2016
Full Name of Payee Voter Contact Services, LLC	Date of Public Distribution/Dissemination
Mailing Address 107 S. West St, PMB 501	08 06 2015
	Amount
City State Zip Code  Alexandria VA 22314	202391.88 Transaction ID : SE.5653
Purpose of Evpanditure	Date of Disbursement or Obligation
Staffing and Services for Field Canvassers  Category Type 001	08 / 06 / 2015
DAND DALII	e Sought: House District:
	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	Ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
McVier Address	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General  Other (specify) ▶
	\1 · //
(a) SUBTOTAL of Itemized Independent Expenditures	202391.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	202391.88
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Edward King  [Electronically Filed] Date 0	01 31 2016
Signature	